FORM D

UNITED STATES URITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

RECEIVED FORM D MAR I 4 2005 NOTICE OF SALE OF SECURITIES ŔŴŔSUANT TO REGULATION D, SECTION 4(6), AND/OR FORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix			Serial			
	DATE REC	EIVED				

Name of Offering ([] check if this is an am	endment and name has cha	nged, and indicate o	hange.)		
Secure Data in Motion, Inc Series D Pr	eferred Stock				
Filing Under (Check box(es) that apply):	[] Rule 504	[] Rule 505	[X] Rule 506	[]Section 4(6)	[] ULOE
Type of Filing: [X] New Filing	[] Amendment				
	A. BASIC II	DENTIFICATION	DATA	_	
1. Enter the information requested about	the issuer			PRO	CESSED
Name of Issuer ([] check if this is an amen Secure Data in Motion, Inc.	dment and name has chang	ged, and indicate ch	• ,	MAR	172005 E
Address of Executive Offices 1875 S. Grant Street, Suite 1000, San Mai	(Number and Street, City teo, CA 94402	y, State, Zip Code)	Telephone Number (650) 572-6100	(Including Area Coc	le) DMSON
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City	y, State, Zip Code)	Telephone Number	(Including Area Coo	le)
Brief Description of Business Software de	evelopment, licensing a	nd services.		<u> </u>	
Type of Business Organization				:	7 ti .
[X] corporation [] business trust	,	ship, already formed ship, to be formed		[] other (please sp	ecify): composition
		Month Y	ear		
Actual or Estimated Date of Incorporation o	r Organization :	[06]	[02]	[X] Actual	[] Estimated at
Jurisdiction of Incorporation or Organization	n: (Enter two-let	ter U.S. Postal Serv	ice abbreviation for St	tate:	- T. 11
	CN for Canad	la; FN for foreign ju	risdiction)		[DE]

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

DOCSNY1:1105553.1

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[X] Executive Officer	[X] Director
T HAT (T . C . C)	[] General and/or M	ianaging Partner		
Full Name (Last name first, if ind	ividuai)			
Cook, Robert				
Business or Residence Address (N				
c/o Secure Data in Motion, Inc.,	1875 South Grant Str	eet, Suite 500, San Mateo, C	CA 94402	
Check Box(es) that Apply:	[] Promoter	Beneficial Owner	[] Executive Officer	[X] Director
	[] General and/or M		[]	[] =
Full Name (Last name first, if ind			·····	
Olkin, Terry	i vidaui j			
	Jamelson and Change City	State 7: Cade		
Business or Residence Address (N				
c/o Secure Data in Motion, Inc.,				
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[X] Executive Officer	[] Director
	[] General and/or M	lanaging Partner		
Full Name (Last name first, if ind	ividual)			
Kobayashi, Rodger	·			
Business or Residence Address (N	Jumber and Street, City	State, Zip Code)		
c/o Secure Data in Motion, Inc.,			'A 94402	
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[X] Executive Officer	[] Director
check box(es) that Apply.	[] General and/or M		[A] Executive Officer	[] Director
End Name (Last and End (City)		latinging i artifei		
Full Name (Last name first, if ind	ividuai)			
Cohen, Al				
Business or Residence Address (N	•			
c/o Secure Data in Motion, Inc.,		<u>eet, Suite 500, San Mateo, C</u>	CA 94402	
Check Box(es) that Apply:	[] Promoter	Beneficial Owner	[X] Executive Officer	[] Director
	[] General and/or M	lanaging Partner	· -	
Full Name (Last name first, if ind				
Brown, Brandon	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Business or Residence Address (N	Jumber and Street City	State 7in Code)		
			4 04403	
c/o Secure Data in Motion, Inc.,				f 1D:
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[X] Executive Officer	[] Director
	[] General and/or M	anaging Partner		
Full Name (Last name first, if indi	vidual)			
Wyatt, Paul				
Business or Residence Address (N	lumber and Street, City	, State, Zip Code)		
c/o Secure Data in Motion, Inc.,	-		A 94402	
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[X] Executive Officer	[] Director
	General and/or M		[] =	[] =
Full Name (Last name first, if indi		magnig i artifor	·	
•	viduai)			
Chou, Nancy	1.00	C:-1-7:-0-1-)		
Business or Residence Address (N				
c/o Secure Data in Motion, Inc.,				
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[X] Executive Officer	[] Director
	[] General and/or M	anaging Partner		
Full Name (Last name first, if indi	vidual)			
Pensmith, Sharyn				
Business or Residence Address (N	Jumber and Street, City	State, Zip Code)		
c/o Secure Data in Motion, Inc.,			'A 94402	
Check Box(es) that Apply:	[] Promoter	Beneficial Owner	[X] Executive Officer	[] Director
Check Box(cs) that Apply.			[A] Executive Officer	[] Director
D 1131	[] General and/or M	anaging raintei		
Full Name (Last name first, if indi	vidual)			
Nikcevic, Paul				
Business or Residence Address (N				
c/o Secure Data in Motion, Inc.,	1875 South Grant Str	eet, Suite 500, San Mateo, C	A 94402	
	,			

· Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director
	[] General and/or Managing Partner		
Full Name (Last name first, if indi	ividual)	•	
Hewitt, Thomas L.			
	Number and Street, City, State, Zip Code)		
	1875 South Grant Street, Suite 500, San Mateo, C		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] General and/or Managing Partner	[] Executive Officer	[X] Director
Full Name (Last name first, if indi			
Spane, Robert J.	,		
Business or Residence Address (N	Number and Street, City, State, Zip Code)		
c/o Secure Data in Motion, Inc.,	1875 South Grant Street, Suite 500, San Mateo, C	A 94402	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] General and/or Managing Partner	[] Executive Officer	[X] Director
Full Name (Last name first, if indi			
Gammill, Jr., Lee M.	, ,		
	Number and Street, City, State, Zip Code)		
	1875 South Grant Street, Suite 500, San Mateo, C	A 94402	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director
	[] General and/or Managing Partner	[]=	[]
Full Name (Last name first, if ind			
Lynch, Charles A.	,		
	Number and Street, City, State, Zip Code)		
	1875 South Grant Street, Suite 500, San Mateo, C	A 94402	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director
11 3	[] General and/or Managing Partner	()	[]
Full Name (Last name first, if indi			
Stakias, G. Michael	,		
	Number and Street, City, State, Zip Code)		
	1875 South Grant Street, Suite 500, San Mateo, C	A 94402	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director
.,	[] General and/or Managing Partner		
Full Name (Last name first, if indi	ividual)		
Greig, III, Thomas G.			
Business or Residence Address (N	Number and Street, City, State, Zip Code)		
c/o Secure Data in Motion, Inc.,	1875 South Grant Street, Suite 500, San Mateo, C	A 94402	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director
	[] General and/or Managing Partner		
Full Name (Last name first, if ind	ividual)		
Breed, Charles			
	Number and Street, City, State, Zip Code)		
c/o Secure Data in Motion, Inc.,	1875 South Grant Street, Suite 500, San Mateo, C		
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner	[] Executive Officer	[] Director
	[] General and/or Managing Partner		
Full Name (Last name first, if ind	ividual)		
Royal Wulff Ventures LLC			
Business or Residence Address (N	Number and Street, City, State, Zip Code)		
P.O. Box 1536-572 Park Avenue		· -	
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner	[] Executive Officer	[] Director
	[] General and/or Managing Partner		
Full Name (Last name first, if ind	•		
Liberty Partners Holdings 42, L	,L.C.		
	Number and Street, City, State, Zip Code)		
1370 Avenue of the Americas, N	ew York, New York 10019-4602		······································
	(Use blank sheet, or copy and use additional copie	s of this sheet, as necessary.)	

1						B. INI	FORMA'	TION A	BOUT O	FFERIN	G				
2. What is the minimum investment that will be accepted from any individual? Yes No Yes No Yes No Yes No Xes Xes	1.	Has the issue	r sold, or	does the is:											
3. Does the offering permit joint ownership of a single unit?	2.	What is the	minimum	investmen						-			•••••	\$Not A	plicable
remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. NONE Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [1] All States (Check "All States" or check individual States) [2] [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [ID] [MT] [NI] [NI] [NI] [NI] [NI] [NI] [NI] [NI	3.	Does the offe	ering perm	it joint ow	nership of	a single u	nit?								-
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	4.	remuneration agent of a bro	for solicitoker or dea	tation of po aler registe	archasers i red with th	n connecti ne SEC an	on with saddor with a	iles of secu state or st	rities in th ates, list th	e offering. se name of	If a perso the broker	n to be list or dealer.	ted is an as If more th	ssociated perso han five (5) per	
Name of Associated Broker or Dealer	Full	Name (Last n	ame first,	if individu	al)						5	-			
Check "All States" or check individual States	Bus	iness or Resid	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip (Code)							
(Check "All States" or check individual States) [] All States [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [HI] [IN] [IN] [IN] [IN] [IN] [IN] [IN] [I	Nan	ne of Associate	ed Broker	or Dealer				···							· · · · · · · · · · · · · · · · · · ·
[AL]	Stat	es in Which P	erson Liste	ed Has Sol	icited or Ir	ntends to S	Solicit Purc	chasers							_
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MI] [NV]		(Check	"All State:	s" or check	individua	ıl States)				•••••				[] All St	ates
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	MI] [OH]	[MN] [OK]	MS] [OR]	[MO] [PA]	
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Full	Name (Last n	ame first,	if individu	al)										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Bus	iness or Resid	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip (Code)	•						····
(Check "All States" or check individual States)	Nan	ne of Associate	ed Broker	or Dealer											
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [] [] All States [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]	Stat	es in Which P	erson Liste	ed Has Sol	icited or Ir	ntends to S	olicit Purc	chasers							
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Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Full	Name (Last n	ame first,	if individu	al)										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Bus	iness or Resid	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip (Code)							
(Check "All States" or check individual States) [] All States [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]	Nan	ne of Associate	ed Broker	or Dealer											
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]	Stat	es in Which P	erson Liste	ed Has Sol	icited or Ir	ntends to S	olicit Purc	chasers							
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]		(Check	"All States	s" or check	individua	l States)								[] All St	ates
		[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt 6,000,000 Equity..... 6,000,000 [] Common [X] Preferred Series D Convertible Securities (including warrants) Partnership Interests.... Other (specify) Total 6,000,000 6,000,000 Answer also in Appendix, Column 3, if filing Under ULOE 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of Purchases Investors 6,000,000 Accredited Investors Non-accredited Investors Total (for filings Under Rule 504 Only) Answer also in Appendix, Column 4 if filing under ULOE If this filing is for an offering Under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of offering Type of Dollar Amount Sold Security Rule 505..... Regulation A..... Rule 504..... Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and

SEC 1972 (1/94)

50,000

50,000

Accounting Fees []
Engineering Fees []
Sales Commissions (Specify finder's fees separately) []
Other Expenses (identify): []
Total [X]

check the box to the left of the estimate...

	 b. Enter the difference between the aggregate offering price given in re- Question 1 and total expenses furnished in response to Part C – Qu difference is the "adjusted gross proceeds to the issuer." 	estion 4.a. This			\$5,950,000
5.	Indicate below the amount of the adjusted gross proceeds to the proposed to be used for each of the purposes shown. If the amount fo not known, furnish an estimate and check the box to the left of the est of the payments listed must equal the adjusted gross proceeds to the is response to Part C – Question 4.b above.	r any purpose is imate. The total			
	The state of the s			to Officers, & Affiliates	Payments To Others
	Salaries and fees	[]	\$	[]	\$
	Research and Development	[]	\$	[]	\$
	Purchase, rental or leasing and installation of machinery and equip	pment []	\$	[]	\$
	Construction or leasing of plant buildings and facilities	[]	\$	[]	\$
	Acquisition of other businesses (including the value of securities offering that may be used in exchange for the assets of securissuer pursuant to a merger)	rities of another	\$	[]	\$
	Repayment of indebtedness		\$		\$
	Working capital	[]	\$	[X]	\$5,950,000
	Other:	[]	\$	[]	\$
	Column totals	[]	\$	[X]	\$5,950,000
	Total payments listed (column totals added)		[X] <u>\$ 5</u>	5,950,000	
	D. FEDERAL	SIGNATURE			
constitu	tuer has duly caused this notice to be signed by the undersigned duly authoritates an undertaking by the issuer to furnish to the U.S. Securities and Exchanger to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	inge Commission, i			
	Secure Data in Motion, Inc.	Signatur	Make	,	Date 3-7.05
NT	of Signer (Print or Type) Rodger Kobayashi	Title of Signer (Pri Vice President	nt or Mype)		

Attention

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)